DECLARATION d POWER OF ATTORNEY

ORIGINAL CONTINUATION DIVISIONAL

As a below named inventor, I declare that the information given helefy is true, that I believe that I am the original, first and sole inventor (if only one name is listed as 1 below) or an original, first and joint inventor (if only one name is listed as 1 below) or an original, first and joint inventor (if only one name is listed as 1 below) or the subject matter which is claimed and for which a patent is sought on the invention entitled:

SEMICONDUCTOR MEMORY DEVICE, ELECTRONIC DEVICE
the specification of which is attached hereto unless the following box is checked:

Was filled on 07/16/03 as United States Application Number or PCT International Application Number 10/620,849

My residence, post office address and citizenship are as stated below next to my name.

Lacknowledge my duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations § 1.56(a). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

		PRIOR FOREIGN	APPLICATION(S)	
COUNTRY		APPLICATION NUMBER	DATE OF FILING Month Day Year	PRIORITY CLAIMED UNDER 35 U.S.C. 119
JAPAN		2002-207383	July 16, 2002	Yes
of this	application is not disclosed in the p ty to disclose information which is n	United States Code, §120 of any United States prior United States application in the manner propagaterial to patentability as defined in Title 37, Co CT international filing date of this application.	ovided by the first paragraph of Title 35, U	nited States Code § 112, I acknowledge
(Application Serial No.) (Filing Date)				
POWE		oventor, I hereby appoint the following attorney(,	(Status) ation and transact all business in the
	correspondence to:	☑ Customer Number 000026021	PATENT TRADEMAR Hogan & Hartson L.L.P. 500 South Grand Avenue, Suite 1900 Los Angeles, California 90071	K OFFICE DIRECT TELEPHONE CALLS TO: Michael Crapenhoft 213-337-6700
Please	e Print) Name of Inventor	10 000	Residence: CITY	STATE or COUNTRY
1	Hideo MUKAI			JAPAN
	Post Office Address		Tokyo	CITIZENSHIP
	c/o Intellectual Property Division, Toshiba Corporation, 1-1, Shibaura 1-chome, Minato-ku, Tokyo 105-8001, JAPAN			Japanese
2	Name of Inventor		Residence: CITY	STATE or COUNTRY
	Post Office Address			CITIZENSHIP
3	Name of Inventor		Residence: CITY	STATE or COUNTRY
	Post Office Address			CITIZENSHIP
	Name of Inventor		Residence: CITY	STATE or COUNTRY
4	Post Office Address			CITIZENSHIP
further	that these statements were made v	herein of my own knowledge are true and that a with the knowledge that willful false statements tes Code, and that such willful false statements	and the like so made are punishable by fir	ne or imprisonment, or both, under
SIGN	NATURE OF INVENTOR 1	tideo Mukai	SIGNATURE OF INVENTOR 2	
DATE Jul. 31, 2003			DATE	
SIGNATURE OF INVENTOR 3			SIGNATURE OF INVENTOR 4	
DATE			DATE	